

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
SOCIETY OF INDEPENDENT GASOLINE MARKETERS OF AMERICA PAC

ADDRESS (number and street) 11495 Sunset Hills Road  
Suite 215  
 Check if different than previously reported. (ACC)  
RESTON VA 20190

2. **FEC IDENTIFICATION NUMBER** C00120030  
**3. IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report(Q1)  
 July 15 Quarterly Report(Q2)  
 October 15 Quarterly Report(Q3)  
 January 31 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12G)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post -Election** Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 11 28 2006 through 12 31 2006

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Type or Print Name of Treasurer Kenneth A. Doyle  
Signature of Treasurer Electronically Filed by Kenneth A. Doyle Date 01 10 2007

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
SOCIETY OF INDEPENDENT GASOLINE MARKETERS OF AMERICA PAC

Report Covering the Period: From: 

M	M
1	1

D	D
2	8

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		34274.94
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period .....	31975.47									
(c) Total Receipts (from Line 19) .....	15290.25	131249.33								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	47265.72	165524.27								
7. Total Disbursements (from Line 31) .....	5000.00	123258.55								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	42265.72	42265.72								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
SOCIETY OF INDEPENDENT GASOLINE MARKETERS OF AMERICA PAC

Report Covering the Period: From: 

M	M
1	1

D	D
2	8

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	15100.00	129010.00
(i) Itemized (use Schedule A) .....	95.00	95.00
(ii) Unitemized .....	15195.00	129105.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	15195.00	129105.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	95.25	2144.33
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	15290.25	131249.33
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	15290.25	131249.33

**DETAILED SUMMARY PAGE**

of Disbursements

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Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	258.55
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	258.55
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5000.00	120500.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	2500.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	2500.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	5000.00	123258.55
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	5000.00	123258.55

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	15195.00	129105.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	2500.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	15195.00	126605.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	258.55
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	258.55

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 11
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
SOCIETY OF INDEPENDENT GASOLINE MARKETERS OF AMERICA PAC

**A.** Full Name (Last, First, Middle Initial)  
Mr. Daniel Arnold

Mailing Address PO Box4745

City State Zip Code  
Rockford IL 61110

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 2 8 / 2 0 0 6

Transaction ID: SA11A1.6605

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Newell A Baker, Jr.

Mailing Address 655 Carman Meadows Dr

City State Zip Code  
St Louis MO 63021

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
JD Street Chairman of the Board

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 2 8 / 2 0 0 6

Transaction ID: SA11A1.6604

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Carl Boyett

Mailing Address PO Box 576277

City State Zip Code  
Modesto CA 95357-6277

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Boyett Petroleum President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
2750.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 2 9 / 2 0 0 6

Transaction ID: SA11A1.6606

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 11
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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SOCIETY OF INDEPENDENT GASOLINE MARKETERS OF AMERICA PAC

Full Name (Last, First, Middle Initial) <b>A. Jeffrey W. LeBeouf</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 8 / 2 0 0 6
Mailing Address 900 Eastridge Drive		Transaction ID: SA11A1.6602
City Modesto	State CA	Zip Code 95355
FEC ID number of contributing federal political committee.	<b>C</b>	Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B. Gregory Love</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 4 / 2 0 0 6
Mailing Address 2521 NW 61st St		Transaction ID: SA11A1.6613
City Oklahoma City	State OK	Zip Code 73126
FEC ID number of contributing federal political committee.	<b>C</b>	Amount of Each Receipt this Period 2500.00
Name of Employer Love's Travel Stops & Country Stores I	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>C. Steven Z. Regenstreif</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 6
Mailing Address 16830 Ventura Blvd Suite 100		Transaction ID: SA11A1.6616
City Encino	State CA	Zip Code 91436
FEC ID number of contributing federal political committee.	<b>C</b>	Amount of Each Receipt this Period 500.00
Name of Employer Marcus & Millichap	Occupation Vice President/Investments	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	4000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 11
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
SOCIETY OF INDEPENDENT GASOLINE MARKETERS OF AMERICA PAC

Full Name (Last, First, Middle Initial) <b>A. Gregory M Scott</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 6
Mailing Address 3050 K Street NW Suite 400		<b>Transaction ID: SA11A1.6607</b>
City Washington	State DC	Zip Code 20007
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 275.00
Name of Employer Collier Shannon Scott	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 775.00	

Full Name (Last, First, Middle Initial) <b>B. William S Shipley, III</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 6
Mailing Address 550 E King Street		<b>Transaction ID: SA11A1.6609</b>
City York	State PA	Zip Code 17405-0946
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2500.00
Name of Employer Shipley Energy	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>C. Sam Simon</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 8 / 2 0 0 6
Mailing Address 24501 Ecorse Road		<b>Transaction ID: SA11A1.6608</b>
City Taylor	State MI	Zip Code 48180
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 400.00
Name of Employer Atlas Oil Corp	Occupation CEO/Chairman	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>3175.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 11
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
SOCIETY OF INDEPENDENT GASOLINE MARKETERS OF AMERICA PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Rodney D Smith		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 6	
Mailing Address PO Box 6		Transaction ID: SA11A1.6612	
City Grandview	State WA	Zip Code 98930-0006	Amount of Each Receipt this Period 175.00
FEC ID number of contributing federal political committee. C			
Name of Employer R H Smith Dist. Co. Inc.	Occupation Treasurer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1175.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Suzanne Sumrall		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 6	
Mailing Address PO Box 94		Transaction ID: SA11A1.6610	
City Bay Springs	State MS	Zip Code 39422	Amount of Each Receipt this Period 4000.00
FEC ID number of contributing federal political committee. C			
Name of Employer		Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4000.00		

Full Name (Last, First, Middle Initial) <b>C.</b> James B Westgate		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 9 / 2 0 0 6	
Mailing Address 1460 Whitehall Rd		Transaction ID: SA11A1.6611	
City Muskegon	State MI	Zip Code 49445	Amount of Each Receipt this Period 1500.00
FEC ID number of contributing federal political committee. C			
Name of Employer WESCO Inc		Occupation Co-President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	5675.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	15100.00

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 10 / 11	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**SOCIETY OF INDEPENDENT GASOLINE MARKETERS OF AMERICA PAC**

**A.** Full Name (Last, First, Middle Initial)  
 Wachovia Bank, NA

Mailing Address PO Box 563966

City State Zip Code  
 Charlotte NC 28262

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 2144.33

Date of Receipt  
 M M / D D / Y Y Y Y  
 1 1 / 3 0 / 2 0 0 6

**Transaction ID: SA17.6619**

Amount of Each Receipt this Period  
 95.25

Interest Earned

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	95.25
<b>TOTAL</b> This Period (last page this line number only) .....	▶	95.25

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 11 / 11

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SOCIETY OF INDEPENDENT GASOLINE MARKETERS OF AMERICA PAC

Full Name (Last, First, Middle Initial)

**A.** BOB CORKER FOR SENATE

Mailing Address 518 GEORGIA AVE 2ND FLOOR

City CHATANOOGA State TN Zip Code 37403

Purpose of Disbursement Retirement of Primary 2006 Election Debt

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: TN District: 00

Transaction ID: SB23.6618

Date of Disbursement

<sup>M</sup> 1	<sup>M</sup> 2	/	<sup>D</sup> 0	<sup>D</sup> 6	/	<sup>Y</sup> 2	<sup>Y</sup> 0	<sup>Y</sup> 0	<sup>Y</sup> 6
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Amount of Each Disbursement this Period

5000.00
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**SUBTOTAL** of Disbursements This Page (optional) ..... ►

5000.00
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**TOTAL** This Period (last page this line number only) ..... ►

5000.00
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